PTO/SB/06 (08-03)
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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875									Application or Docket Number			
CLAIMS AS FILED - PART I (Column 1) (Column 2)							_	SMALL	ENTITY	OR	OTHER THAN SMALL ENTITY	
	FOR		NUMBE	R FILED	NUMB	ER EXTRA		RATE	FEE		RATE	FEE
	IC FEE CFR 1.16(a))								s	OR		s
TOTAL CLAIMS			minus 20	ue 20 = - *			x s =	i -		V		
INDEPENDENT CLAIMS									-	OR	=	
(37 CFR 1.16(b))				minus 3				X \$=		OR	X \$=	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))								+ \$=		OR	+ \$=	
* If the difference in column 1 is less than zero, enter "0" in column 2.								TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II												
7/8/0) (Column 1) (Column 2) (Column 3)								CMALL		OR		R THAN
	110/0		LAIMS		HIGHEST		l	SMALL	ENITIY	i	SMALL	ENTITY
NT A		Δ.	MAINING AFTER ENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
)ME	Total (37 CFR 1.18(c))	1	12	Minus	"/02-	=		x \$ =	<u> </u>	OR	x \$ =	
AMENDMENT	Independent (37 CFR 1.16(b))		10	Minus	/0	=		x s =		OR	x \$ =	
AM	FIRST PRESENT	ATION	OF MULTIPLE	DEPENDI	ENT CLAIM (37 C	FR 1.16(d))		+ s =		OR	+s =	
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
		(Co	lumn 1)		(Column 2)	(Column 3)				1		
ENT B		C REM	LAIMS MAINING FTER NDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
ME	Total (37 CFR 1.16(c))	•		Minus	**	=		x s =		OR	x \$ =	,
AMENDM	Independent (37 CFR 1.16(b))	•		Minus	***	=		x \$ =		OR	x \$ =	
AMI	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							+\$ =		OR OR	+s =	
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
(Column 1) (Column 2) (Column 3)								·				
NT C		REN A	LAIMS MAINING FTER NDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
)ME	Total (37 CFR 1.18(c))	•		Minus	**	=		x \$=		OR	x \$_ =	
AMENDMENT	Independent (37 CFR 1.16(b))	*		Minus	***	=		x \$=		OR	x s =	
Α A	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							+ \$=		OR .	+ \$=	
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" (Tetal or Independent) is the highest number found in the appropriate box in column 1.												

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PATENT APPLICATION	N DETI		ON RECOR	D		10	Û	598	46	
CLAIMS A	(Column 1)	RT I (Colu	mn 2)	SM	ALL EN	mr ′	OR	OTHER		·
TOTAL CLAIMS				Г	RATE	FEE		RATE	FEE	
FOR	NUMBER FILE	D NUMB	ER EXTRA	BA	SIC FEE		OR	BASIC FEE	980	
TOTAL CHARGEABLE CLAIMS	34 minus	20= - /	+	<b> </b>	<b>C\$</b> 9=		OR	X\$18=	252	
NDEPENDENT CLAIMS	/C minus	3= 7			X42=		OR	X84=	588	
MULTIPLE DEPENDENT CLAIM P	RESENT			T,	140=		OR	+280=		
If the difference in column 1 is	less than zero,	enter "0" in c	olumn 2	L.	OTAL		OR	TOTAL		
// / CLAIMS AS	AMENDED -	PART II					10.,	OTHER	THAN	
/0/29/13 (Column 1)		(Column 2)	(Column 3)	8	MALL	ENTITY	OR	SMALL	ENTITY	
CLAIMS REMAINING AFTER AMENDMENT  Total Independent Independent Independent		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		PATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	- -
Total · 37	Minus .	.37		15	K\$ 9=		OR	X\$18=	·	· -
Independent • • • • • )	Minus .	-10 .			X42=	· <u>r</u>	OR	X84=	-12	
FIRST PRESENTATION OF M	IULTIPLE DEPEN	IDENT CLAIM	18	1.	140=		OR	+280=		- · · ·
				L	TOTAL			TOTAL		
(0/30/04(Column 1)		(Column 2)	(Column 3)	ADI	DIT. FEE			ADDIT, FEE		
CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	-	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	·
Total 37	2000	37	- /	1,	<b>(\$ 9=</b>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ØŔ	X\$18=		
E Independent • / ()		100 f	-/	1	X42=		OR	X84=		
FIRST PRESENTATION OF N	NULTIPLE DEPEN	NDENT CLAIM		t.	140=		OR	+280=.		•
1 /				Ľ	TOTAL		00	TOTAL		
10/1/01		(Column 2)	(Column 3)	ADI	DIT. FEE		On	ADDIT. FEE	ـــــــا · ·	
(Column 1) CLAIMS REMAINING AFTER AMENDMENT Total Independent Independent		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	Γ	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Total 1/12		37	-65	1	K\$ 9=	, 66	OR	X\$18=	1.170	0
Independent • //	1	10	•	$\vdash$	X42=			X84=	<del>/ / - /</del>	1
FIRST PRESENTATION OF I	MULTIPLE DEPE	NDENT CLAIM		<b>-</b>			OR			1
* If the entry in column-1 is less than	the entry in column	2, write "O" in o	otumn 3.	Ľ	140= TOTAL		OR	+280= TOTAL	1110,	0
** If the "Highest Number Previously ***If the "Highest Number Previously The "Highest Number Previously F	Pald For IN THIS S Pald For IN THIS S	SPACE is less the SPACE is less th	an 20, enter "20." an 3, <b>ente</b> r "3."		DIT. FEE	propriate bo	OR x bn cc	ADDIT. FEE	770,1	
ORM STD. STR. (Raw &MI)								PARTMENT O	COMMERCE	ı